

CLAIMS ONLY						Application Number 09761033		Filing Date			
						Applicant(s)					
						* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	*	*	*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1	/						51				
2		/	/		/		52				
3		/					53				
4		/					54				
5		/					55				
6		/					56				
7		/					57				
8		/					58				
9		/					59				
10		/					60				
11	/	/					61				
12		/					62				
13		/					63				
14		/					64				
15		/					65				
16		/					66				
17		/					67				
18		/					68				
19		/					69				
20		/					70				
21		/					71				
22		/					72				
23		/					73				
24		/					74				
25		/					75				
26		/					76				
27		/					77				
28		/					78				
29			/				79				
30			/				80				
31			/				81				
32			/				82				
33			/				83				
34			/				84				
35			/				85				
36			/				86				
37			/				87				
38		/	/				88				
39			/				89				
40			/				90				
41			/				91				
42			/				92				
43			/				93				
44			/				94				
45			/				95				
46			/				96				
47			/				97				
48							98				
49							99				
50							100				
Total Indep	3		2		2		Total Indep				
Total Depend	24		18		14		Total Depend				
Total Claims	27		20		16		Total Claims				